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1	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
•	00/531 375	03/21/2000	Auriela Haller	7682-049	7698	

TITLE OF INVENTION: RECOMBINANT PARAINFLUENZA VIRUS EXPRESSION SYSTEMS AND VACCINES

APPLN. TYPE	SMALL ENTITY	ISSUE FI	FEE PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330)	\$0	\$1330	05/03/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
SALIMI	, ALI REZA	1648		424-211100		•	
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<u>Laura A. Coruzzi (Reg. No. 30,774</u>2) April 21, 2004 NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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